## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: Masatomi SATP

Serial No.: 10/533,733

Filed: May 4, 2005 Ex

For: MULTILAYER TUBE

Commissioner for Patents P. O. Box 1450 Alexandria, VA 22313-1450 Group No.: 3754 Examiner: James F. Hook

## NOTICE OF APPEAL FROM THE PRIMARY EXAMINER TO THE BOARD OF PATENT APPEALS AND INTERFERENCES (37 C.F.R. 1.191)

NOTE:	An appeal may be based on one rejection in a prior applie of Oct. 10, 1997, 62 F.R. 53131, at 53167.	cation and one rejection in a continuing application. Notice			
NOTE:	There is no requirement for a notice of appeal to: (1) appealed claims. Notice of Oct, 10, 1997, 62 F.R. 53131	be signed (see, 37 C.F.R. 41.31(3)(b)) or (2) identify the , at 53167.			
[ X ] <u>May 2</u>	Applicant hereby appeals to the Board from the 29, 2008, rejecting claims <u>1 and 7</u> for a	e decision of the Primary Examiner, mailed t least the second time.			
NOTE:	In an ex parte reexamination filed after November 29, 19 claims. MPEP § 2273 (8th Edition, Rev. 2)	99, an appeal may be taken only after the final rejection of			
Patent Owner hereby appeals to the Board from the decision of the Examiner, mailed finally rejecting claims					
The item(s) checked below are appropriate:					
	CERTIFICATE OF MAILING/TRA	NSMISSION (37 CFR 1.8a)			
I hereby certify that this correspondence is, on the date shown below, being:					
	MAILING	FACSIMILE			
su ad	posited with the United States Postal Service with fficient postage as first class mail in an envelope dressed to the Commissioner for Patents, P. O. Box 1450, exandria, VA 22313-1450	transmitted by facsimile to the Patent and Trademark Office to (571) 273-8300  EFS-WEB  transmitted electronically  Signature			
Date:	December 1, 2008	JANET I. CORD  (type or print name of person certifying)			

1.	A Pre-Appeal Brief Request for Review				
	[ ] [X]	is attached as requir	ed therefor		
2.	STATUS OF AI	PPLICANT			
	This application	is qualified as			
	[ ] [X]	a small entity. other than a small e	ntity.		
3.	FEE FOR FILING	G NOTICE OF APPEAL	•		
	The fee for filing the Notice of Appeal is:				
	[ ] a small ([X] othe	entity r than a small entity	\$270.00 \$540.00		
		Not	ice of Appeal fee due \$ 540		
4.	4. EXTENSION OF TERM				
NO	processing or e that are taken request, measu in which case t on the day afte notifying the a filed. The peric	37 C.F.R. § 1.704(b) " an applicant shall be deemed to have failed to engage in reasonable efforts to conclude processing or examination of an application for the cumulative total of any periods of time in excess of three months that are taken to reply to any notice or action by the Office making any rejection, objection, argument, or other request, measuring such three-month period from the date the notice or action was mailed or given to the applicant, in which case the period of adjustment set forth in § 1.703 shall be reduced by the number of days, if any beginning on the day after the date that is three months after the date of mailing or transmission of the Office communication notifying the applicant of the rejection, objection, argument, or other request and ending on the date the reply was filed. The period, or shortened statutory period, for reply that is set in the Office action or notice has no effect on the three-month period set forth in this paragraph."			
NO	41.31(d). (But	ls set forth in 37 C.F.R. 41.31 see 37 C.F.R. 1.645 for exte ne in reexamination proceedi	are subject to the provision of § 1.136 for patent applications. 37 C.F.R. asion of time in interference proceedings and 37 C.F.R. 1.550(c) for ags).		
(complete (a) or (b), as applicable)					
The proceedings herein are for a patent application and the provisions of 37 C.F.R.1.136 apply.					
	(a) [X ] App 1.17(a)(	licant petitions for an of 1)-(4)) for the total num	extension of time under 37 C.F.R. 1.136 (fees: 37 C.F.R. per of months checked below:		

	Extension (months)	Fee for other than small entity	Fee for all entity
	one month	\$ 130.00	\$ 65.00
	two months	\$ 490.00	\$ 245.00
$\boxtimes$	three months	\$ 1,100.00	\$ 555.00
	four months	\$ 1,730.00	\$ 865.00
		Fee \$ <u>1100</u>	

If an additional extension of time is required, please consider this a petition therefor.

(check and complete the next item, if applicable)

[ ] An extension for months has already been secured, and the fee paid therefor

		of \$is deducted from the total fee due for the total months of extension now requested.
		Extension fee due with this request \$
		or
	(b)	[ ] Applicant believes that no extension of term is required. However, this conditional petition is being made to provide for the possibility that applicant has inadvertently overlooked the need for a petition and fee for extension of time.
5.	ТО	TAL FEE DUE
Th	e tot	al fee due is:
	No	tice of Appeal fee \$ _540
	Ext	tension fee (if any) \$ 1100
		TOTAL FEE DUE \$1640
6.	FE.	E PAYMENT
	[ X	Attached is a check in the sum of \$  Charge Account No. 12-0425 the sum of \$ 1640  duplicate of this transmittal is attached.
7.	FE.	E DEFICIENCY OR OVERPAYMENT
NO	TE:	If there is a fee deficiency and there is no authorization to charge an account, additional fees are necessary to cover the additional time consumed in making up the original deficiency. If the maximum, six-month period has expired before the deficiency is noted and corrected, the application is held abandoned. In those instances where authorization to charge is included, processing delays are encountered in resuming the papers to the PTO Finance Branch in order to apply these charges prior to action on the cases. Authorization to charge the deposit account for any fee deficiency should be checked. See the Notice of April 7, 1986, 1065 O.G 31-33.
	⊠	If any additional extension and/or fee is required, this is a request therefor and to charge Account No. $\underline{12-0425}$ .
		AND/OR
	$\boxtimes$	If any additional fee for claims is required, charge Account No. 12-0425.
		AND/OR
	$\boxtimes$	Refund any overpayment to Account No. <u>12-0425</u> .

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00140

PATENT TRADEMARK OFFICE

SIGNATURE OF PRACTITIONER

CLIFFORD J. MASS

CLIFFORD J. MASS

(type or print name of practitioner)

P.O. Address

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